



- Non-Profit
- Corporate
- Organization
- Member
- Private
- Sponsored

Date of Event: _____

Quote: _____

Telephone: (804) 643-2847

Fax: (804) 644-6616

RENTER'S INFORMATION

TYPE OF EVENT: Wedding Ceremony _____; Wedding Reception _____; Wedding Ceremony and Reception _____; Dinner _____; Party _____; _____

Expected Attendance: _____ Time: _____

Bride: _____ Groom: _____

(IF APPLICABLE) Groom's Telephone No: _____

RENTER (*person responsible for payment*): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (H) _____ (C) _____

Fax: _____ E-Mail: _____

EMPLOYER: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

CONTACT PERSON: _____

Address: Same as above

City _____ State _____ Zip: _____

Telephone: (H) _____ (O) _____

Fax: _____ E-Mail _____ @ _____

Portion of the Bolling Haxall House to be used:

- Auditorium, Foyer and Kitchen
- Entire First Floor
- Entire First Floor & Boardroom
- Parlors, Foyer and Kitchen
- Other

How did you hear about The Bolling Haxall House? _____